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BIBDATASHEET

CONFIRMATION NO. 6457

Bib Data Sheet

SERIAL NUMBER 09/496,588	FILING OR 371(c) DATE 02/02/2000 RULE	CLASS 348	GROUP ART UNIT 2612	ATTORNEY DOCKET NO. 0879-0253P
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APPLICANTS

Manabu Hyodo, Asaki-shi, JAPAN;
 Masahiro Konishi, Asaka-shi, JAPAN;
 Chiaki Ichikawa, Asaka-shi, JAPAN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****
 JAPAN 11-025523 02/02/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 04/07/2000

Foreign Priority claimed ☐ yes ☐ no
 35 USC 119 (a-d) conditions ☐ yes ☐ no ☐ Met after
 met Allowance
 Verified and Acknowledged
 Examiner's Signature _____ Initials _____

STATE OR
COUNTRY
JAPAN

SHEETS
DRAWING
6

TOTAL
CLAIMS
16

INDEPENDENT
CLAIMS
2

ADDRESS
2292

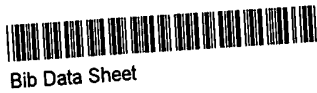
TITLE

Method and apparatus for automatic white balance adjustment based upon light source type

**FILING FEE
RECEIVED**
1078

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT
 No. _____ for following:

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of time)☐ 1.18 Fees (Issue)☐ Other _____☐ Credit



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SERIAL NUMBER 09/496,588	FILING DATE 02/02/2000 RULE -	CLASS 399	GROUP ART UNIT 2852	ATTORNEY DOCKET NO. 0879-0253P
APPLICANTS Manabu Hyodo, Asaki-shi, JAPAN; Masahiro Konishi, Asaka-shi, JAPAN; Chiaki Ichikawa, Asaka-shi, JAPAN;				
** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 11-025523 02/02/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** 04/07/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>TJH</i>		STATE OR COUNTRY JAPAN	SHEETS DRAWING 6	TOTAL CLAIMS 16
INDEPENDENT CLAIMS 2				
ADDRESS 2292				
TITLE Automatic white balance adjustment method and apparatus				
FILING FEE RECEIVED 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			
<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit				